State of Minnesota	District Court			
County	Judicial District:			
	Court File Number:			
	Case Type: Dissolution			
In Re the Marriage of:				
Name of Petitioner	Affidavit in Support of			
and	Motion For Temporary Relief Without Children			
Name of Respondent				
·				
STATE OF MINNESOTA)	aa			
COUNTY OF)	SS			
My name is	and I state under oath that:			
1. I am the (<i>check one</i>): □ Petitioner/Pla	nintiff Respondent/Defendant in this case, and			
I make this Affidavit in support of my A	Motion For Temporary Relief Without Children.			
2. □ I AM NOT asking for temporary spous	☐ I AM NOT asking for temporary spousal maintenance.			
☐ I AM asking the Court to decide tempor	☐ I AM asking the Court to decide temporary spousal maintenance LATER.			
☐ I AM asking the Court for spousal maintenance. I do not have enough income to meet m				
needs. My spouse has income to meet his or her needs and is able to help me. My				
income and expenses are in my <i>Application for Temporary Relief</i> . I need \$				
per month. I cannot support myself be	per month. I cannot support myself because			
r				
3. I am asking the Court to order my spou	I am asking the Court to order my spouse to pay my attorney's fees: ☐ YES ☐ NO. If			
YES, I need attorney's fees because				

4.		I am asking the Court to order that I have sole use and possession of our home located at
		(full address)
		I am asking the Court to order that my spouse have sole use and possession of our home
		located at (full address)
		I am asking the Court to order that my spouse and I stay in the home located at (full address)
		I am asking the Court for the relief checked above because
5.		My spouse and I have already divided our personal belongings, household goods and
		furniture: (check one): YES NO. If NO, I am asking for the temporary use and
		possession of the following personal property, household goods and furniture (<i>list the specific items</i>):
		because
		I am asking that my spouse have the temporary use and possession of the following
		household goods and furniture (list the specific items):
		because
6.		My spouse and I own motor vehicle(s): □ YES □ NO. If YES, I want the temporary
		use and possession of the following motor vehicle(s): (list year/make/model for each vehicle)

ecause
want my spouse to have the temporary use and possession of the following motor chicle(s): (list year/make/model for each vehicle)
ecause
will make the payments and insurance costs for my vehicle(s): YES NO. If
o, I want my spouse to make these payments because
ly spouse should make the payments and insurance costs for his/her vehicle(s): YES NO. If NO, I want my spouse to make these payments because
ly spouse and I have debts: YES NO. If YES, I am asking the Court to order e debts to be paid temporarily as I asked in my <i>Motion</i> because
want to change certain medical, dental, automobile or life insurance policies: YES
NO. If YES, I want to make the following changes:

State ENG

a.	What insurance has lapsed or been cancelled:
b.	The date that the insurance lapsed or was cancelled:
c.	Who let the insurance lapse or cancelled it:
d.	Why should the insurance be reinstated:
I bel	ieve that my spouse's income will increase: □ YES □ NO. If YES, this income
is (ci	heck all that apply): salary or wage increases; overtime pay; bonuses; or
□ O1	ther (specify:
I wa	nt the Court to order my spouse to immediately notify me of any changes in his or
her i	ncome: YES NO because (s)he might not tell me and I want to know because
•	
I wa	nt the Court to order that my spouse shall not spend or otherwise use income raises,
inco	me tax refunds, bonuses or other extra income: YES NO. If YES, because
I am	asking the Court for permission to sell or otherwise dispose of property: YES
□ N	NO. If YES, I want to sell or otherwise dispose of the following property (be
spec	<i>ific</i>):
	y.c).
beca	use
Lack	red the Court for additional relief: YES NO. I asked for this relief because
Lask	

www.courts.state.mn.us/forms

Dated:	
	Signature (Sign only in front of notary public or court administrator.)
	Name:
Sworn/affirmed before me this	Address:
day of,	City/State/Zip:
	Telephone: ()
Notary Public \ Deputy Court Administrator	1

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